

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         | JL       |        | 7-27-01 |
| O.I.P.E. CLASSIFIER       |          | 8      | 8-601   |
| FORMALITY REVIEW          | JK       | 1018   | 8/05/01 |
| RESPONSE FORMALITY REVIEW | MTB      | 954    | 5/6/01  |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim       | Date |
|-------------|------|
| Final 3     | 1/6  |
| Original 10 | 2/11 |
| Original 03 | 2/14 |
| (1) ✓       |      |
| 3 ✓         |      |
| (5) ✓       |      |
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| 45 ✓        |      |
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| Claim       | Date |
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| Final 51    |      |
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| Claim        | Date |
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| Final 101    |      |
| Original 102 |      |
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If more than 150 claims or 10 actions  
staple additional sheet here